

1305

**Political Organization  
Report of Contributions and Expenditures**

OMB No 1545-1696

▶ See Separate instructions.

**A** For the period beginning May 26, 2010 and ending May 8, 2013

**B** Check applicable boxes ☐ Initial report ☐ Change of address ☐ Amended report ☒ Final report

**1** Name of organization Citizens for Responsive Government **Employer identification number** 27-2681787

**2** Mailing address (P O Box or number, street, and room or suite number) 620 McBee Rd.

City or town, state, and ZIP code Bellbrook, OH, 45305

**3** E-mail address of organization takebackcolumbus@gmail.com **4** Date organization was formed 5/26/2010

**5a** Name of custodian of records Stephen Martinek **5b** Custodian's address 620 McBee Rd  
Bellbrook, OH, 45305

**6a** Name of contact person Stephen Martinek **6b** Contact person's address 620 McBee Rd  
Bellbrook, OH, 45305

**7** Business address of organization (if different from mailing address shown above) Number, street, and room or suite number  
City or town, state, and ZIP code

- 8** Type of report (check only one box)
- a** ☐ First quarterly report (due by April 15)
- b** ☐ Second quarterly report (due by July 15)
- c** ☐ Third quarterly report (due by October 15)
- d** ☒ Year-end report (due by January 31)
- e** ☐ Mid-year report (Non-election year only-due by July 31)
- f** ☐ Monthly report for the month of \_\_\_\_\_ (due by the 20th day following the month shown above, except the December report, which is due by January 31)
- g** ☐ Pre-election report (due by the 12th or 15th day before the election)  
(1) Type of election \_\_\_\_\_  
(2) Date of election \_\_\_\_\_  
(3) For the state of \_\_\_\_\_
- h** ☐ Post-general election report (due by the 30th day after general election)  
(1) Date of election \_\_\_\_\_  
(2) For the state of \_\_\_\_\_

**9** Total amount of reported contributions (total from all attached **Schedules A**) 0.00

**10** Total amount of reported expenditures (total from all attached **Schedules B**) 0.00

Sign Here

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete

Steve Martinek  
Signature of authorized official

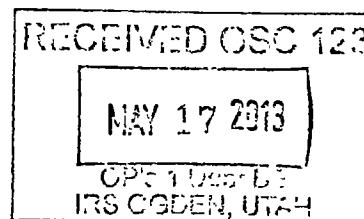
5/8/2013  
Date

For Paperwork Reduction Act Notice, see separate instructions.

Cat No 30406G

Form **8872** (11-2002)

MAY 29 2013  
RECEIVED ENTITY DEPT



04246 46038 JUL 17 13

SCANNED JUN 30 2013

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Schedule A Itemized Contributions		Schedule A page 1 of 1
Name of organization <i>Citizens for Responsive Government</i>		Employer identification number <i>27-2681787</i>
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$ Date of contribution
	Contributor's occupation	
	Aggregate contributions year-to-date ▶ \$	
Subtotal of contributions reported on this page only Enter here and also include this amount in the total on line 9 of Form 8872		\$ <i>0.00</i>

<b>Schedule B Itemized Expenditures</b>		Schedule B page <span style="border: 1px solid black; padding: 0 5px;">1</span> of <span style="border: 1px solid black; padding: 0 5px;">1</span>
Name of organization <i>Citizens for Responsive Government</i>		Employer identification number <i>27-2681787</i>

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

<b>Subtotal</b> of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872		▶ \$ <i>0.00</i>
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